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**\*BIBDATASHEET\***

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Bib Data Sheet

|                             |                                       |              |                        |                                     |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>10/616,565 | FILING DATE<br>07/10/2003<br><br>RULE | CLASS<br>005 | GROUP ART UNIT<br>3673 | ATTORNEY<br>DOCKET NO.<br>8266-1087 |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*** *yes*  
This application is a CON of 09/810,376 03/16/2001 PAT 6,609,260  
which claims benefit of 60/190,367 03/17/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 10/07/2003**

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR<br>COUNTRY<br>SC | SHEETS<br>DRAWING<br>5 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
|---|---------------------------|------------------------|-----------------------|----------------------------|

35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after

Verified and Acknowledged  
Allowance  
*[Signature]*  
Examiner's Signature Initials

**ADDRESS**  
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Intellectual Property Group  
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46204

**TITLE**  
Hospital bed

|            |   |   |
|------------|---|---|
| FILING FEE | FEES: Authority has been given in Paper | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of |
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